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**Application** 

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## 2137 Art Unit Address to: Examiner Name M. J. Pyzocha Assistant Commissioner for Patents 200301934-1 (1662-40100) Attorney Docket Number Washington, D.C. 20231 Please change the Correspondence Address for the above-identified application to: Place Customer 022879 Number Bar Code **Customer Number** 1 Label here Type Customer Number here OR Individual Name Address Address ZIP State City Country Fax Telephone This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor. Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or Agent of record. Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_ Typed or Printed Name Jonathan M. Harris, Reg. No. 44,144 CONLEY ROSE, P.C. Signature 09/13/2005 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*

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